

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|----------|
| FEE DETERMINATION | AA | 10291 | 5/20 |
| O.I.P.E. CLASSIFIER | | | 5-6-3-99 |
| FORMALITY REVIEW | YC | 71420 | 6/11/99 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|----------------|---------------|
| Final Original | |
| 1 | 123958 |
| 2 | 0001 d1 02 03 |
| 3 | ✓ ✓ ✓ ✓ ✓ |
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| Claim | Date |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)